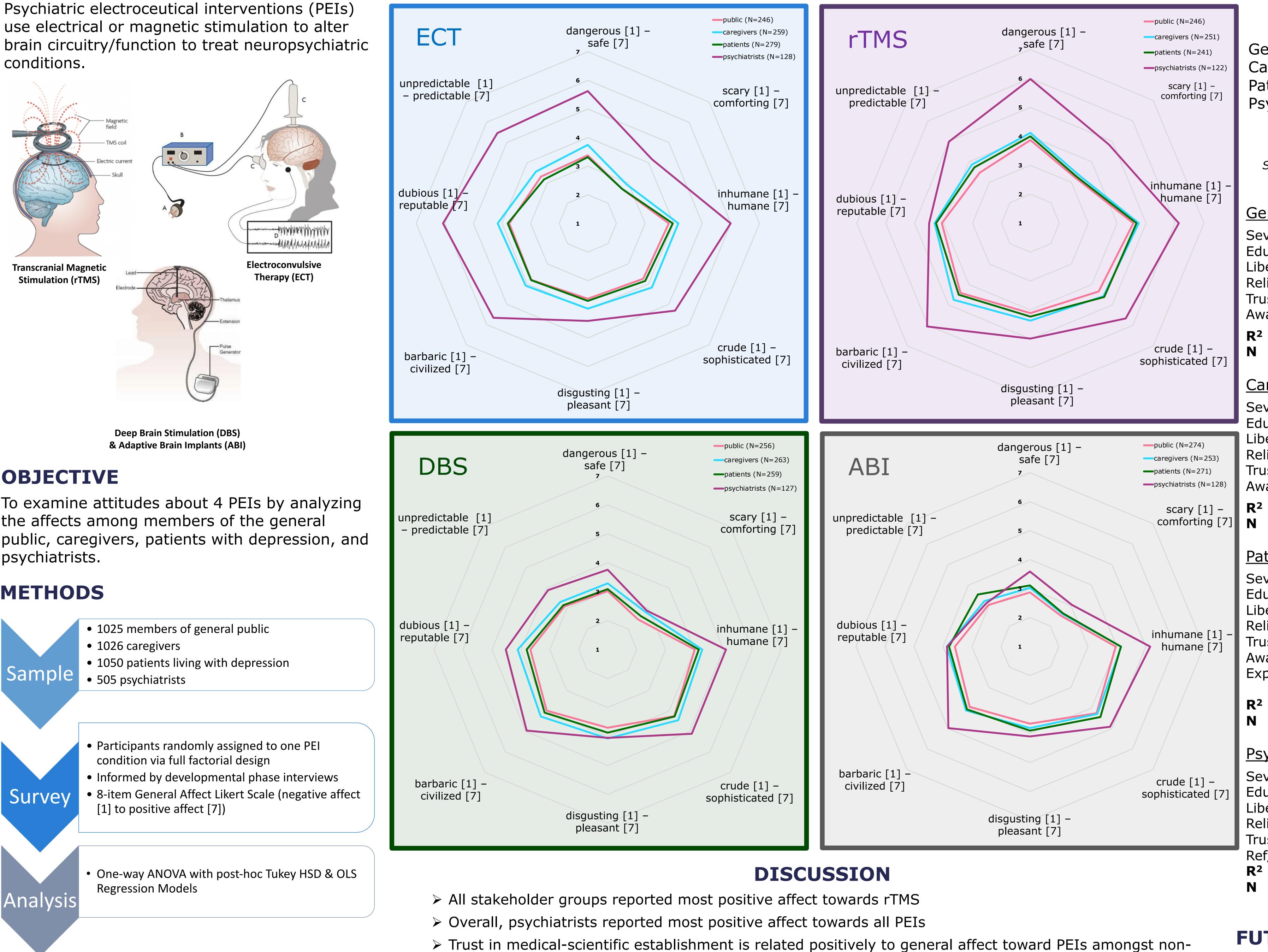


Maryssa M.C. Gilbert, MA, RD<sup>1</sup>, Aaron M. McCright, PhD<sup>2</sup>, Gerald R. Nowak III, MA<sup>2</sup>, Eric Achtyes, MD, MS<sup>3,4</sup>, Robin Bluhm, PhD<sup>5,6</sup>, Laura Y. Cabrera, PhD<sup>7,8,9</sup>

1. College of Human Medicine, MSU; 2. Department of Sociology, MSU; 3. Division of Psychiatry & Behavioral Medicine, MSU; 3. Division of Behavioral Medicine, MSU; 3. Division of Psychiatry & Behavioral Medicine Neural Engineering, PSU; 8. Department of Engineering Science and Mechanics, PSU; 9. Rock Ethics Institute, PSU.

## BACKGROUND

Psychiatric electroceutical interventions (PEIs) use electrical or magnetic stimulation to alter conditions.



## **OBJECTIVE**

To examine attitudes about 4 PEIs by analyzing the affects among members of the general public, caregivers, patients with depression, and psychiatrists.

## **METHODS**

Sample Survey Analysis

## ACKNOWLEDGEMENTS

We thank other team members: Emily Castillo, Marissa Cortright, Eleni Varelas & Megan Penzkofer. We also thank the National Institutes of Health BRAIN Initiative for funding this project (#1RF1MH117802-01).

# **Stakeholder Affect Toward Psychiatric Electroceutical Interventions for Treatment-Resistant Depression**

- psychiatrists
- > Religiosity, education, & political conservatism are related positively to general affect
- $\succ$  Non-clinicians' awareness of & psychiatrists' experience with PEIs were positively related to affect





**ONE-WAY ANOVA RESULTS** Mean scores on General Affect Scale

DBS ABI ECT rTMS 3.53 3.52 General Public 4.00 3.46 3.83 3.85 4.26 3.61 Caregivers 3.63 3.54 3.66 Patients 4.16 5.34 5.52 4.29 4.15 Psychiatrists

### **OLS REGRESSION RESULTS**

Statistically significant (p<.05) standardized coefficients from models explaining General Affect Scale

eneral Public	ECT	rTMS	DBS	ABI
vere exp condition ucation		.14	.15	
eral ideology ligiosity	15			.17
ust in MSE vareness of PEI	.27	.19 .14	.22	.19
	.06 246	.05 246	.07 256	.07 274
regivers	ECT	rTMS	DBS	ABI
vere exp condition ucation eral ideology ligiosity ust in MSE vareness of PEI	.22		.18	
	.22 .13		.18	.25 .25
	.14 259	.02 251	.09 263	.12 253
<u>tients</u>	ECT	rTMS	DBS	ABI
vere exp condition ucation		.15		.24
eral ideology ligiosity	.24	.19		.16
ist in MSE	.23	.21	.19	.13
vareness of PEI perience with PEI			.22 .20	
	.15 279	.13 241	.20 259	.15 271
<u>ychiatrists</u>	ECT	rTMS	DBS	ABI
vere exp condition ucation eral ideology ligiosity ust in MSE				.21
f/administered PEI	.02 128	.25 . <b>09</b> 122	.21 .03 127	.02 128

## **FUTURE DIRECTION**

Future targeted educational initiatives may better align attitudes with current evidence around PEIs, helping to demystify the negative and often unfounded views around some of these procedures.